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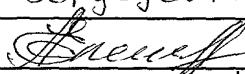
Approved for use through 9/30/00 OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number		Parent Filing Date (MM/DD/YYYY)		Parent Patent Number (if applicable)							
		29 November, 2000									
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.											
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith <table border="0" style="margin-left: 20px;"> <tr> <td><input type="checkbox"/> Customer Number</td> <td><input type="checkbox"/> Place Customer Number Bar Code Label here</td> </tr> <tr> <td colspan="2">OR</td> </tr> <tr> <td><input type="checkbox"/> Registered practitioner(s) name/registration number listed below</td> <td></td> </tr> </table>						<input type="checkbox"/> Customer Number	<input type="checkbox"/> Place Customer Number Bar Code Label here	OR		<input type="checkbox"/> Registered practitioner(s) name/registration number listed below	
<input type="checkbox"/> Customer Number	<input type="checkbox"/> Place Customer Number Bar Code Label here										
OR											
<input type="checkbox"/> Registered practitioner(s) name/registration number listed below											
Name	Registration Number	Name		Registration Number							
<input type="checkbox"/> Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto											
Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label <input type="checkbox"/> OR <input type="checkbox"/> Correspondence address below											
Name	Evgeni Sergeyevich Alechine										
Address	Apt. 20, Irtyshskaya St., 17										
Address											
City	Khabarovsk	State		ZIP	680006						
Country	Russia	Telephone		Fax							
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name (first and middle if any)			Family Name or Surname								
Evgeni Sergeyevich			Alechine								
Inventor's Signature					Date 29 Nov-2000						
Residence: City	Khabarovsk	State	Country	Russia	Citizenship Russian						
Post Office Address											
Post Office Address											
City	Khabarovsk	State	ZIP	680006	Country Russia						
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto											

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PTO/SB/01 (12-97)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	
First Named Inventor <i>Alechine</i>	
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

*Method of Stabilization of Operating Conditions
in Electronic Devices*

the specification of which

(Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
<input type="text"/>	<i>29 November, 2000</i>	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



**Patent and Trademark Office
US department of Commerce
To: Assistant Commissioner for Patents**

TRANSMITTAL LETTER
for utility patent application

**Title of the Invention : "METHOD OF STABILIZATION OF
OPERATING CONDITIONS IN ELECTRONIC DEVICES"**
Inventor's Name : Evgueni S. Alechine

Inventor's Name : Evgueni S. Alechine

Dear gentlemen:

I send you my application for patent of my new invention "Method of Stabilization of Operating Conditions in Electronic Devices". I ask to provide intensive examination and to receive fees according to the procedure as to my money which has been in the Office of Finances of the USPTO (check No.2038 35255450 M00000025 13100001 G 005, 135, 679 11.09.98 Philadelphia, PA)

I ask for opening a deposit account that I would transfer my money for patenting of my other 5 – 8 inventions.

I ask to note two versions of writing of my name: Evgeni S. Alechine (in French) according to the entry in my foreign passport and Eugene S. Aleshin in English.

I ask you to send me a sample of correct writing of all the documents for patenting in the USA and according to the PCT or to indicate mistakes committed by me in my application. I could not use the attorney's help.

Sincerely yours,
Eugene S. Aleshin  / November 29, 2000

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